FCC Form 310 February 1977	·		(FOR COMMISSION USE ONLY)				
	NITED STATES OF AMERICA	Iccion	Name of applicant	(See Instruction	D)	· · · · · · · · · · · · · · · · · · ·	
FEDERAL COMMUNICATIONS COMMISSION APPLICATION FOR AN INTERNATIONAL, EXPERIMENTAL TELEVISION,		World International Broadcasters, Inc.					
EXPERIMENTAL FA	Street Address						
STATION LICENSE			P.O. Box 88				
	INSTRUCTIONS ed in all cases when appl	ying for an Internation-	City		State	XIP Code	
al, Experimental Television, Experimental Facsimile, or a Developmen			Red Lion PA 17356 Name and address of person to whom communications should be sent.				
Broadcast Station Licens	if different from above.						
			Name				
B. Prepare and file three copies of this form and all exhibits. File lwith the Federal Communications Commission, Washington, D.C. 20554.			Street Address				
1			City	-,	State	ZIP Code	
C. Number exhibits serially in the space provided in the body of the							
form and list each exhib Date each exhibit.	form and list each exhibit in the space provided on page 3 of this form.		1. Construction	permit covere	d by this appl	ication	
Date each exhibit.		#145 0/0	File number	Date of Gran			
#IHF-C/F		20171126-00004 4/3/18 WINB Type of station Location					
D. The name of the applicant must be stated exactly as it appears on the construction permit which is being covered.		• • •	, · · · · · · · · · · · · · · · · · · ·		2 DA		
			International Broadcast Red Lion,		I, FA		
E. Information called for by this application which is already on file with the Commission need not be refiled in this application provided (1) the			Construction begun C		Construction	Construction completed	
T .	le in another application of (2) the information is ide		Is the station now in satisfactory Yes V No				
Y .	(if any), the FCC form nur		operating condition and ready for regular				
	er form containing the inf and (3) after making the	· · · · · · · · · · · · · · · · · · ·	operation? If the answer is "No", explain				
	e since date of filing."	-					
•	rate into this application ontained in the application						
to. The incorporated ap tirety, be open to the pu	plication or other form wi	I thereafter, in its en-					
thety, to open to the pu		!	1			•	
F. This application shall	l be personally signed by	the applicant, if the	2. Transmitting apparatus installed				
applicant is an individu	al; by one of the partners, er, if the applicant is a co	if the applicant is a	Make Type No.				
who is an officer, if the	applicant is an unincorpo	rated association; by	Amplifier Systems, Inc.		CF-500	CE-50000WS-HF	
under the laws of the ap	cointed officials as may be plicable jurisdiction, the	applicant is an eligi-	Transmitter location				
applicant's physical dis	r by the applicant's attor ability or of his absence	from the United States.	State County				
set forth the reason why	ne event he signs for the the application is not si	gned by the applicant.			ork		
In addition, if any matter is stated on the basis of the attorney's belief only (rather than his knowledge), he shall separately set forth his		tely set forth his	City or town Red Lion			et and number 370 Windsor Road	
reasons for believing th	at such statements are tr	ie.	Geographical co		.oro yviilusoi	Noau	
G. BE SURE ALL NECESSARY INFORMATION IS FURNISHED AND ALL PARAGRAPHS ARE FULLY ANSWERED. IF ANY PORTIONS OF THE APPLICATION ARE NOT APPLICABLE, SPECIFICALLY SO STATE. DEFECTIVE OR INCOMPLETE APPLICATIONS MAY BE RETURNED WITHOUT CONSIDERATION.		North latitude		West longi			
		39	39 54 22		76° 34 56		
	ized by construction pe	rmit	 _			-	
Call Sign	Frequency 1/	Name of march	D		ecessary	Type of	
	rrequestry 17	Hours of operation	Power 2/		width (kc)	emission 3/	
WINB		As authorized	10_kW	 1) kHz	DRM DRM	
1/ Not required of I	nternational Broadcast	Stations.		L			
2/ For amplitude mode fully described al this information	ulation television (A5) cove, such as aural and as Exhibit No.	l visual carrier frequ	encies and power f	or television	and type of er	f particulars are not mission, etc., supply ency modulation, give	
ummodulated anten Exhibit No.	na imput power. For or Describe in	ther types of emission Exhibit No.	, give a full desc	ription of me	hod of determ		
	Commission's Rules and						

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4. Attach as Exhibit No. On File antenna system.	a sketch and dimensions of	6. In what respect, if any, does the apparatus constructed differ from that described in the application for construction permit or in the permit?						
5. Frequency monitor		permit of the permit.						
Make	Type No.							
Jackson Labs	ULN-1100							
By what method and how often will is bration of the frequency monitor be								
Continuous Accuracy: GPS Locked: +/- 0.003 Hz at 1 No GPS: +/- 0.2 Hz at 10 MHz	0 MHz							
Give the following data on the calib	ration of the frequency	-						
	ame of checking agency or	- 1						
	method used							
1.								
2.	· · · · · · · · · · · · · · · · · · ·	 						
3.								
4.		1						
Frequency measured by sucl	h Monitor reading high or low							
1.								
2.		7						
3.]						
4.								
power of the United States because of the previous use of the same, whether by license or otherwise, and requests a station license in accordance with the application. (See Section 304 of the Communications Act of 1934.) THE APPLICANT, or the undersigned on the applicant's behalf, states that he has endeavored to supply full and correct information as to all matters which are relevant to this application and that he has done so as to all matters within his own knowledge.								
CERTIFICATION I certify that the statements in this application are true, complete and correct to the best of my knowledge and belief, and are made in good faith.								
-								
Signed and dated this 16th d	Signed and dated this 16th day of April , xx 20.18							
WILLFUL FALSE STATEMENTS FORM ARE PUNISHABLE	MADE ON THIS	World International Broadcasters, Inc. (Name of Applicant) By Wise (Signature) Title President						

FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

We have estimated that each response to this collection of information will take 6 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required data, and actually complete and review the form or response. If you have any comments on this burden estimate, or on how we can improve the collection and reduce the burden it causes you, please e-mail them to pra@fcc.gov or send them to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-1035), Washington, DC 20554. Please DO NOT SEND COMPLETED APPLICATIONS TO THIS ADDRESS. Remember - you are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1035.

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Exhibit No.	Para. No.	Name of officer or employee (1) by whom or (2) under whose direction exhibit was prepared (show (which)	Official title		
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